

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/569768

FILING DATE

APPLICANT(S)

	CLAIMS											
	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT							
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1	1											
2		1										
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49												
50												
TOTAL IND.	1											
TOTAL DEP.		1										
TOTAL CLAIMS	1	0										

PTO-1360 (REV. 11/94)

	CLAIMS					
	AS FILED	AFTER 1 ST AMENDMENT	AFTER 2 ND AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

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